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CONFIRMATION NO. 1656

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|--|---|-------------------------------|---|---|--------------------------------|
| SERIAL NUMBER 10/707,657 | FILING OR 371(c) DATE 12/30/2003 RULE | CLASS 703 | GROUP ART UNIT 2123 | ATTORNEY DOCKET NO. RD28217-2 | |
| APPLICANTS James Kenneth Aragones, Clifton Park, NY; Jeffrey William Stein, Malvern, PA; | | | | | |
| ** CONTINUING DATA ***** This application is a CIP of 09/682,314 08/17/2001 <i>Dme</i> | | | | | |
| ** FOREIGN APPLICATIONS ***** <i>Dme</i> | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/11/2004 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | | STATE OR COUNTRY NY | SHEETS DRAWING 6 | TOTAL CLAIMS 24 | INDEPENDENT CLAIMS 6 |
| 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> | | | | | |
| Verified and Acknowledged <i>Dme</i> Examiner's Signature <i>Dme</i> Initials | | | | | |
| ADDRESS 41838 | | | | | |
| TITLE SYSTEM AND METHOD FOR MEASURING QUALITY OF BASELINE MODELING TECHNIQUES | | | | | |
| FILING FEE RECEIVED 1230 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |